

Preparer Name (if other than taxpayer)

Signature

### City of Kansas City, Missouri - Revenue Division

# WAGE EARNER RETURN EARNINGS TAX



Phone: (816) 513-1120

E-fi	ile: www	v.kcmo.org/revenue													M I	s s	o u	R I
First Name:	Middle Name: L								me	:								
SSN:	St	Street Address:  City:											Unit:					
Account ID:	C												_ ;	ZIP:				
Period From: Per	riod To:																	
1. Enter "X" in box if amended return		1							DOLL	ARS	CE	NTS						
2. Salaries, wages, commissions (attack		2																
3. Amount of nonresident adjustment (		3										$\Box$						
4. Total taxable wages (line 2 less line 3)		4										$\Box$						
5. Earnings tax (1% of line 4)		5										Н						
6. Earnings tax paid with extension RD-112		6			+							$\Box$						
7. Local tax withheld by employer as shown		7			+							$\forall$						
8. Earnings tax paid to other city (resid		8										$\forall$						
9. Tax Due (line 5 less lines 6, 7 and		9			+			+				H						
10. Penalty (5% per month, not to exceed		10										H						
11. Interest (1% per month until tax is paid in full)																		H
12. Total Amount Due (sum of lines 9, 10 and 11)																		H
13. Overpayment to be refunded (lines 6 + 7 + 8 less 5 - no refunds less than \$1.00)																		H
14. Amount Paid			******					13 14			+							
		a. Routing Number:	15a															
15. Refund: Have it directly deposited to you checking or savings account.	r	b. Account Number:	15b															
oncoming or ouvings account.		c. Account Type:	15c Checking				Sa	avin	gs									
Notes:																		
Do not file this form if your 1% earnings tax	is fully with	held by your employer.																
File this return on or before April 15th.  The Revenue Division and the IRS routinely	, chara con	anutor tance and audit ro	culto I	∩iff	orone	200	othe	or the	n tl	2000	allow	od i	ındor	City	Ordin	anoo	will b	^
identified and may result in an audit or furth			Suits. i	יוווע	eren	JC3,	Ollie	51 U1C	וו ווג	1056	allow	eu t	muei	City	Oruin	ance,	WIII D	<b>5</b>
Do not include Business Income on this form	n.																	
Write your SSN on your check.																		
DO NOT SEND CASH. Make check payab		-																
Mail to: City of Kansas City, Missouri, R					-						4	<b>.</b>						
For changes to name, address or FEIN/SSN	-	_		-							тор о	t yo			7 N		7	
I authorize the Commissioner of Revenue o Under penalties of perjury, I declare this ret	-	<u>-</u>									tatoo	ı	Ye	s	N	υ <u></u>		
onder penalties of perjury, ruedate this ret	uiii lo De a	irue, correct, and comple	בום מנינ	JUU	nung	101	uiel	axal	лe )	cai S	oiale	۱.						
Print Name of Taxpayer	Signat	ure	Title							Da	te				Phone	<b></b>		

Title

Date

Phone

# RD-109NR City of Kansas City, Missouri - Revenue Division NON RESIDENT SCHEDULE WAGE FARNER RETURN

Print Name of Taxpayer

Signature

## **WAGE EARNER RETURN**



	Legal Name:FEIN / SSN:																							N	Ψ	®	
	Account ID:									_														N S I S			
Α.	Occupation					_			Da	aytim	ne	Phone															
В.	RESIDENT / NONRESIDENT	STATUS																									
	Nonresident for entire year																										
	Part Year Resident		М	М		ח	) D			Υ	γ		М	М		D	D	1	,	Y	Υ						
_	Resident:	from	"	"	1			1		İ	•	to	T	"	1	T		7	1	1							
	Nonresident:	from			1			1	+			to			1			1	1								
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You may not deduct vacation, sick, holiday or other leave as days worked outside the city  3. Percentage of days worked outside the city (Line 2 divided by Line 1)											3				%					DΟI	LARS		CE	NTS			
4. Gross wage per Federal W-2 (Box 1 on W-2)									4									DOL	LAINO		OLI	113					
5. Non-residency deduction Enter amount on line 3 of RD-109 (Line 4 x Line 3)											5																
D.	6. Amount of severance pay in	ncluded in you	ır co	mpe	nsa	tion	1							6													
	7. Date of separation													7								1	Г		1		
E.	8. LIST BELOW THE RECOR	D(S) YOU MA	AINT	AIN	ТО	SU	PPC	ORT	CA	ALCI	UL	ATIONS FOR	DA	YS I	VOF	RKE	D C	)UT:	SIDI	<b>M</b> E C	<b>M</b> FT	HE (	<b>D</b> CITY			Y 	Y
F.	PLEASE NOTE: Although you requested to submit this docur.  9. May the City contact your e You must provide the following Employer's name and KCMO Employer's e-mail address: Name of employer's contact p Contact person's phone numb	mployer? g information address: erson:	a late	er da	NO Dur r	or vo	erific Claim and r	eque	n k	on-r	resi	refund is appr idency / days	wor	ked (	outs	ide (	of th	ne ci	ity w	vill I	oe v	erifie	ed.				
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SSN/FEIN

Date

Phone



#### City of Kansas City, Missouri - Revenue Division

### WAGE EARNER RETURN EARNINGS TAX

Phone: (816) 513-1120 E-file: www.kcmo.org/revenue



#### **GENERAL INSTRUCTIONS FOR COMPLETING FORM RD-109**

#### 1. Who must file:

- a) Every resident individual who derives income from salaries, wages, commissions or other compensation for which the tax has not been withheld by the resident's employer(s). If your income is derived from the ownership of a business or other self-employment, you MUST file a Profits Return form RD-108.
- b) Every nonresident individual working or providing services within the city who derives income from salaries, wages, commissions or other compensation from which the tax has not been withheld by the employer.
- c) Exception: Where city earnings tax has been withheld from an individual's entire taxable earnings by his or her employer (s), no further payment is due and a return does not need to be filed. If you are no longer required to file a return, please call 513-1120 to explain why it is not required.

#### 2. When to file:

- a) The return is to be filed on or before April 15 of each year. Please file electronically at www.kcmo.org/revenue.
- b) Extension--An extension of time to file the Kansas City, MO, Wage Earner Return (RD-109) may be obtained by filing form RD-112, Application for Automatic Extension (or state or federal extension forms) with PAYMENT of the estimated tax due on or before April 15. <a href="Extension payment must be 90% of the tax due to avoid penalty and interest">Extension payment must be 90% of the tax due to avoid penalty and interest.</a>

#### 3. Where to file:

RETURNS AND SCHEDULES FOR REFUND REQUESTS SHOULD BE MAILED TO:
City of Kansas City, Missouri, Revenue Division, PO Box 842707 Kansas City, MO 64184-2707

EXTENSION REQUESTS SHOULD BE MAILED TO: REVENUE DIVISION, PO Box 843825, KANSAS CITY, MO 64184-3825

4. Securely tape (do not staple) W-2s and 1099 forms to an 8-1/2 x 11 sheet of paper.

The information below answers frequently asked questions. **These lists are not comprehensive.**Please contact the Revenue Division at (816) 513-1120 if you have further questions

#### WHAT IS TAXABLE

- Salaries, wages, tips, bonuses, and commissions
- Sick, vacation, severance pay and salary continuation plans
- Moving expenses reimbursement
- Value of life insurance premiums over \$50,000 of coverage
- Nongualified stock option distributions

#### WHAT IS NOT TAXABLE

- Interest and dividends
- Social Security
- Pension benefits
- Employer contributions to pension plans
- Capital Gains
- Unemployment or disability benefits
- Insurance proceeds
- Gain on sale of home
- Estate income
- Employee contributions to deferred compensation plans such as 401(k) plans



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KANSAS CITY MISSOURI

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#### **INSTRUCTIONS FOR COMPLETING FORM RD-109 (continued)**

Fill out your name, address, and social security number and tax period. List employer name(s) and addresses. Attach an additional sheet of paper, if necessary. To avoid delays in processing, use this form and securely tape (do not staple) W-2s and 1099 forms to an 8-1/2 x 11 sheet of paper.

- **Line 1.** Put an "X" in box if this is an amended return.
- **Line 2.** Enter total salaries, wages, commissions, and other compensation.
- Line 3. NONRESIDENTS ONLY: Enter amount of nonresident adjustment (Enter amount from line 5 of RD-109NR) <u>Attach the Nonresident Schedule RD-109NR</u>
- **Line 4.** Subtract line 3 from line 2 and enter Total taxabel wages
- **Line 5.** Multiply line 4 by .01 (1%) and enter Earnings Tax.
- **Line 6.** Enter amount of tax paid with Application for Automatic Extension form (RD-112).
- **Line 7.** Enter amount of local tax withheld by employer(s)
- **Line 8. RESIDENTS ONLY:** Enter earnings tax or income tax paid to another city on line 8 as a credit. This credit is allowed only to the extent of the tax imposed by Kansas City (1% of taxable earnings) or actual tax paid, whichever is less.
- Line 9. Enter amount due (Line 5 less lines 6, 7, and 8). If negative, enter zero and go to line 13.
- Line 10. If amount on line 9 is past due, add penalty at rate of 5% per month (not to exceed 25%) from due date to date of payment.
- Line 11. If amount on line 9 is past due, add interest at rate of 1% per month from due date until tax is paid in full.
- **Line 12.** Enter total amount due (sum of lines 9, 10, and line 11).
- Line 13. If the sum of lines 6, 7, and 8 less line 5 results in an overpayment, enter amount to be refunded. See line 15, if you want to receive your refund request via direct deposit.
- Line 14. Enter amount paid. Write your social security number on check and make check payable to KCMO City Treasurer.
- **Line 15. DIRECT DEPOSIT:** Choose direct deposit for a fast, simple, safe, secure way to have your refund deposited automatically to your checking or saving account. Fill in boxes 15a, 15b, and 15c to request that your refund be issued via direct deposit.
- **Line 15a.** The routing number must be nine digits. The first two digits must be 01 through 12 or 21 through 32. The number is located on the left bottom corner of your personal/business checks.
- Line 15b. The account number can be up to 17 characters (both numbers and letters). Include hyphens but omit spaces and special symbols. The account number is to the right of the routing number on personal/business checks. Be sure not to include the check number.
- Line 15c. Check the box for the type of account that corresponds to the routing and account numbers listed on lines 15a and 15b.

The City is not responsible if a financial institution rejects a direct deposit request in which case the City will issue a refund check.

BE SURE TO SIGN YOUR RETURN DO NOT SEND CASH

Visit our website atwww.kcmo.org/revenue for more forms and instructions



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#### INSTRUCTIONS FOR COMPLETING NONRESIDENT SCHEDULE RD-109NR

#### Who must file a Wage Earner Nonresident Schedule (RD-109NR):

The Wage Earner - Nonresident Schedule should be used by nonresidents who have performed services within and outside the city. This form is used in conjunction with the RD-109 Wage Earner Return - Earnings Tax Form to calculate a refund or an overpayment of taxes for services performed outside of Kansas City, Missouri. If you meet the qualifications above and are requesting a refund, this form must be attached to the RD-109 along with a current copy of your W-2(s). These forms and documents must be filed no later than April 15th of each year unless an extension has been requested.

**Section A** Fill out occupation and daytime phone number.

#### Section B Resident / Nonresident Status

Check whether you were a nonresident the entire year or a part year resident. If a part year resident enter dates you were a resident and dates you were a nonresident.

#### Section C Non-Residency Allocation Formula

- 1. Enter 260 for days worked everywhere. If not using a standard 260, enter days worked, write your reason and method of calculation on the lines provided and attach supporting documentation.
- 2. Enter actual days worked outside the city.
- 3. Enter percentage of days worked outside the city. (Line 2 divided by Line 1)
- **4.** Enter total gross wages of all W-2(s). (Box 1 on W-2)
- 5. Enter non-residency deduction. (Line 4 x Line 3). Enter this amount on line 3 of the RD-109.
- **Section D 6.** Enter amount of severance pay included in compensation.
  - **7.** Enter date of separation.
- Section E 8. Enter type of record(s) you maintain to support your calculations for days worked in and outside of the city.
- Section F 9. Fill out employer's name, e-mail address, contact person and contact's phone number.

#### **General Information**

Documentation may be requested from you during the review process to verify your days worked outside the city. Days worked outside the city must reflect the number of <a href="whole">whole</a> days worked outside of the city. The number of work days for a standard work year is 260. You may not deduct vacation, sick, holiday or other leave when calculating the number of days worked everywhere or outside the city. Any portion of the day worked in the city is a full day in the city.

The following may delay issuance of your refund: failure to provide required information when requested, failure to use approved forms, not able to verify days worked outside of the city, inconsistencies on returns, failure to sign return, extensive or incomplete supporting documentation.

When documentation is requested you must provide definitive details about the number of days worked outside of the city, including dates, location, and business purpose. Types of documentation include, but may not be limited to the following which can be verified by employer records: appointment calendar, work and/or travel orders, time and/or payment records, travel logs, certain types of receipts, proof of change of address such as utility bills, lease agreements, and property tax receipts.

Failure to provide documentation when <u>requested</u> will result in your refund being denied.